

Hons Investigations

www.HonsInvestigations.com

Notification / Release of Information

The purpose of this form is to notify you that a Consumer Report and/or an Investigative Consumer Report will be conducted on you in the course of consideration for employment. I hereby authorize your company or any agent of your company to contact any and all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts and military services to release information about my background including, but not limited to, information about my employment, education, consumer credit history, driving record, criminal record, and general public records history to the person or company with which this form has been filed. This releases the aforesaid parties from any liability and responsibility for collecting the above information. This release shall remain in effect for the length of my employment. I understand I have the right to obtain a free copy of this consumer report if; (1) Any adverse action/decision is made based on the information in the consumer report, & (2) If the request is made in writing within 60 days of the adverse action. If an Investigative consumer Report is conducted, I will be notified in writing within three days from request of said report. I Believe to the best of my knowledge that all information I have provided is accurate true and correct and that I fully understand the terms of this release.

PLEASE PRINT CLEARLY AND RETURN TO EMPLOYER

Last Name: _____

First Name: _____ Middle Name _____

List other LAST names used in the past 7 years and give the dates _____ from _____ to _____
those names were used. _____ from _____ to _____

Date of Birth _____ / _____ / _____ Social Security Number: _____ - _____ - _____

Drivers License # _____ State Issued: _____

Phone # (day) (____) _____ - _____ (evening) (____) _____ - _____

Current Address: _____

City: _____ State: _____ Zip: _____ Since: _____

Previous Address _____

City: _____ State: _____ Zip: _____ Dates: _____

List the cities or towns you have lived in the past 7 years. Use additional space if necessary.

City _____ State _____ Zip _____ Dates ____/____ to ____/____

City _____ State _____ Zip _____ Dates ____/____ to ____/____

City _____ State _____ Zip _____ Dates ____/____ to ____/____

Have you been arrested, convicted or pled Nolo Contendere to any crimes in the past 7 years? _____

If yes, please describe offenses, dates, disposition and location. _____

Signature: _____ Date: _____